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| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | Chapter 7                       |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ☐ Chapter 13                    | Check if this an amended filing |

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1:   | Identify Yourself   |  |   |
|----|---|---|--|---|
|    |   |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1. | You   | r full name   |  |   |
|    | your<br>pictu<br>exar<br>licer<br>Brin-<br>iden | e the name that is on a government-issued ure identification (for mple, your driver's use or passport).  g your picture tification to your ting with the trustee. | Tanya First name  H Middle name  Kara Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
| 2. | use<br>Inclu                                    | other names you have<br>d in the last 8 years<br>ade your married or<br>den names.  |  |   |
| 3. | you<br>num<br>Indi                              | y the last 4 digits of<br>r Social Security<br>aber or federal<br>vidual Taxpayer<br>atification number   | xxx-xx-0925  |   |

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Debtor 1 Tanya H Kara

Case number (if known)

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |
|--|---|---|--|--|--|
| 4. Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years |   | ■ I have not used any business name or EINs.  | ☐ I have not used any business name or EINs.   |  |  |
|  | Include trade names and doing business as names | Business name(s)  | Business name(s)   |  |  |
|  |   | EINs  | EINs   |  |  |
| 5.   | Where you live                                  |   | If Debtor 2 lives at a different address:  |  |  |
|  |   | 5724 West 106th Street #1E Chicago Ridge, IL 60415 Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |  |  |
|  |   | <b>Cook</b> County  | County   |  |  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |
|  |   | 9634 S 52nd Avenue<br>Oak Lawn, IL 60453  |  |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |
| 6.   | Why you are choosing this district to file for  | Check one:  | Check one:   |  |  |
|  | bankruptcy                                      | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |  |
|  |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |  |
|  |   |   |  |  |  |

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Case number (if known) Debtor 1 Tanya H Kara

| ar                            | t 2: Tell the Court About   | Your B      | ankruptcy Ca | ise                                    |  |   |        |
|-------------------------------|---|-------------|--------------|--|--|---|--------|
| 7.                            | The chapter of the Bankruptcy Code you are  |             |              |  | of each, see <i>Notice Required</i> of page 1 and check the appropri | by 11 U.S.C. § 342(b) for Individuals Filing for Bankrupto<br>iate box.   | су     |
|                               | choosing to file under  | ■ Chapter 7 |              |  |  |   |        |
|                               |   | □ с         | hapter 11    |  |  |   |        |
|                               |   | □ с         | hapter 12    |  |  |   |        |
|                               |   | □ с         | hapter 13    |  |  |   |        |
|                               |   |             |              |  |  |   |        |
| 3.                            | How you will pay the fee  | •           | about how yo | ou may pay. Typ<br>attorney is subi    | pically, if you are paying the fee                                   | eck with the clerk's office in your local court for more de<br>yourself, you may pay with cash, cashier's check, or me<br>ehalf, your attorney may pay with a credit card or check        | oney   |
|                               |   |             |              |  | tallments. If you choose this ones (Official Form 103A).             | otion, sign and attach the Application for Individuals to F   | Pay    |
| but is not required to, waive |   |             |              | uired to, waive                        | your fee, and may do so only if                                      | tion only if you are filing for Chapter 7. By law, a judge r<br>your income is less than 150% of the official poverty lin<br>e in installments). If you choose this option, you must fill | e that |
|                               |   |             |              |  |  | fficial Form 103B) and file it with your petition.  |        |
| ).                            | Have you filed for bankruptcy within the  | ■ No        | ).           |  |  |   |        |
|                               | last 8 years?   | ☐ Ye        | es.          |  |  |   |        |
|                               |   |             | District     |  | When   | Case number   |        |
|                               |   |             | District     |  | When   | Case number   |        |
|                               |   |             | District     |  | When   | Case number   |        |
| 10.                           | Are any bankruptcy cases pending or being   | ■ No        | )            |  |  |   |        |
|                               | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Ye        | es.          |  |  |   |        |
|                               |   |             | Debtor       |  |  | Relationship to you   |        |
|                               |   |             | District     |  | When   | Case number, if known   |        |
|                               |   |             | Debtor       |  |  | Relationship to you   |        |
|                               |   |             | District     |  | When   | Case number, if known   |        |
| 11.                           | Do you rent your residence?   | ■ No        | Go to I      | ine 12.                                |  |   |        |
|                               | residence :   | ☐ Ye        | es. Has yo   | our landlord obta                      | ained an eviction judgment aga                                       | inst you and do you want to stay in your residence?   |        |
|                               |   |             |              | No. Go to line                         | 12.  |   |        |
|                               |   |             |              | Yes. Fill out <i>In</i> bankruptcy per |  | on Judgment Against You (Form 101A) and file it with the  | is     |

Document Page 4 of 40 Case number (if known) Debtor 1 Tanya H Kara Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Chapter 11 of the Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Tanya H Kara Document Page 5 of 40 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Answer Those Questions for Reporting Purposes  16. Make kind of debts do you have?  16. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  18. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  19. Are your filling under Chapter 7.  10. State the type of debts you one that are not consumer debts or business debts  17. Are your filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  18. Yes, and the filling under Chapter 7. Do you estimate that after any exempt property is excluded and are paid that funds will be available to distribute to unsecured creditors?  19. No  19. No  10. I am not filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  19. No  19  | Deb  | tor 1 Tanya H Kara                         |                      | Docu                        |  | nber (if known)                                  |
|---|--|--|----------------------|-----------------------------|--|--|
| Individual primarily for a personal, family, or household purpose."   | Part   | 6: Answer These Ques                       | stions for R         | eporting Purposes           |  |  |
| Yes. Go to line 17. Are your debts primarily business debts? Business are debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  | 16.  |  | 16a.                 |                             |  | defined in 11 U.S.C. § 101(8) as "incurred by an |
| 16b.  |  |  |                      | ☐ No. Go to line 16b.       |  |  |
| money for a business or investment.    No. Go to line 16c.   Yes. Go to line 17.  |  |  |                      | Yes. Go to line 17.         |  |  |
| Yes. Go to line 17.   State the type of debts you owe that are not consumer debts or business debts   |  |  | 16b.                 |                             |  |  |
| 17. Are you filing under Chapter 7. Go to line 18.  17. Are you filing under Chapter 7. Go to line 18.  18. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  18. How many Creditors do you estimate that you owe?  19. How much do you estimate that you owe?  19. How much do you lestimate that you estimate that you owe?  19. How much do you lestimate your assets to be worth?  20. How much do you lestimate your labelities of \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,001 - \$100,000   \$500,000        |  |  |                      | ☐ No. Go to line 16c.       |  |  |
| 17. Are you filling under Chapter 7. Go to line 18.    Yes.   1 am filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?    Yes.   1 am filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?    No  |  |  |                      | ☐ Yes. Go to line 17.       |  |  |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  18. How many Creditors do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  19. How many Creditors do you estimate that you owe?  19. How much do you estimate that you owe with a sound of the worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be?  19. How much do you estimate your assets to be?  19. How much do you estimate your assets to be?  19. How much do you estimate your assets to be?  19. How much do you estimate your liabilities to be?  19. How much do you estimate your liabilities to be?  19. How much do you estimate your liabilities to be?  19. Soo,001 - \$100,000   |  |  | 16c.                 | State the type of debts ye  | ou owe that are not consumer debts or busin    | ness debts                                       |
| after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  18. How many Creditors do you estimate that you owe?  19. How much do you estimate that you estimate that you owe?  19. How much do you estimate that you owe?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  20. How much do you estimate your fiabilities to be?  21. How much do you estimate your fiabilities of your fiabilities have been done and your estimate your fiabilities of your fiabilities have been done and you have your fiabilities of   | 17.  |  | □ No.                | I am not filing under Cha   | pter 7. Go to line 18.                         |  |
| administrative expenses are paid that funds will be available for distribution to unsecured creditors?  18. How many Creditors do you estimate that you owe?  19. How much do you estimate that you owestimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your fiabilities to be?  19. So _\$50,000   \$1,000,001 - \$10 million   \$500,000,001 - \$10 million   \$500,000,001 - \$10 million   \$10,000,000,001 - \$50 million   \$10,000,000,001 - \$50 million   \$500,0001 - \$10 million   \$500,000 - \$500,0001 - \$10 million   \$500,000,001 - \$10 million   \$500,000 - \$500,0001 - \$10 million   \$10,000,000,001 - \$10 million   \$500,000 - \$500,0001 - \$10 million   \$500,000 - \$500,0001 - \$10 million   \$500,000 - \$500,0001 - \$10 million   \$10,000,000,001 - \$10 million   \$500,000 - \$500,0001 - \$10 million   \$10,000,000,001 - \$10 million  | after any exempt are paid that funds will be available to distribute to unsecured creditors? |  |                      |                             |  |  |
| be available for distribution to unsecured creditors?  18. How many Creditors do you estimate that you we?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your assets to be worth?  19. How much do you estimate your liabilities to be?  19. S50,000   \$1,000,001   \$100,000   \$10,000,001   \$500 million   \$10,000,0001   \$10,000,001   \$10 million   \$10,000,0001   \$10,000,001   \$10   |  | administrative expenses                    |                      | ■ No                        |  |  |
| you estimate that you owe?    50-99   |  | be available for distribution to unsecured | d                    | ☐ Yes                       |  |  |
| you estimate that you owe?    50-99   | 18.  | How many Creditors do                      | <b>1</b> 1 10        |                             | П 1 000-5 000                                  | □ 25 001-50 000                                  |
| 100-199   |  | you estimate that you                      | _                    |                             |  |  |
| 19. How much do you estimate your assets to be worth?    \$0.\$50,000   |  | owe?                                       |                      |                             | <b>1</b> 0,001-25,000                          | ☐ More than100,000                               |
| estimate your assets to be worth?    \$50,001 - \$100,000   |  |  | □ 200-9              | 99                          |  |  |
| ### Sign Below  For you    \$50,001 - \$100,000   \$10,000,001 - \$50 million   \$1,000,000,001 - \$10 billion   \$100,000,001 - \$10 million   \$500,000,001 - \$10 million   \$500,000 - \$10 million   \$100,000,001 - \$10 million   \$100,000,000,001 - \$10 million   \$100,000,000 - \$10,000,000,001 - \$10 million   \$100,000,000 - \$10 million   \$100,000,000 - \$10,000,00 | 19.  |  | <b>\$</b> 0 - \$     | 50 000                      | □ \$1,000,001 - \$10 million                   | ☐ \$500,000,001 - \$1 billion                    |
| \$100,001 - \$500,000   \$50,000,001 - \$100 million   \$10,000,000,001 - \$50 billion   \$500,001 - \$1 million   \$100,000,001 - \$500 million   \$500,000,001 - \$50 billion   \$500,001 - \$100,000   \$1,000,001 - \$100 million   \$500,000,001 - \$100 billion   \$500,001 - \$100,000   \$1,000,001 - \$100 million   \$10,000,001 - \$10 billion   \$10,000,001 - \$100 billion   \$10,000,001 - \$100 million   \$10,000,000,001 - \$100 billion   \$100,000,001 - \$100 million   \$100,000,001 - \$100 billion   \$100,000,001 - \$100 million   \$100,000,000,001 - \$100 million   \$100,000,000,001 - \$100 million   \$100,000,000,001 - \$100 million   \$100,000,000,001 - \$100 million   \$100,000,001 - \$100 million   \$100,000,000,001 - \$100 million   \$100,000,000,000,000,000,000,000,000,000  |  |  |                      |                             |  |  |
| 20. How much do you estimate your liabilities to be?    \$0 - \$50,000  |  |  |                      |                             | _ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `        |  |
| estimate your liabilities to be?    \$50,001 - \$100,000  |  |  | □ \$500,             | 001 - \$1 million           | □ \$100,000,001 - \$500 million                | ☐ More than \$50 billion                         |
| For you    Sign Below   Sign Be  | 20.  |  | □ \$0 - \$           | 50,000                      | ☐ \$1,000,001 - \$10 million                   | □ \$500,000,001 - \$1 billion                    |
| For you    Sign Below   Stophology   Stophol  |  |  |                      | · ·                         |  |  |
| For you  I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Is/ Tanya H Kara  Tanya H Kara  Signature of Debtor 2  Signature of Debtor 1  Executed on August 2, 2016  Executed on   |  |  |                      |                             |  |  |
| I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Isl Tanya H Kara  Tanya H Kara  Signature of Debtor 2  Signature of Debtor 1  Executed on August 2, 2016  Executed on  |  |  | <b>□</b> \$500,      | 001 - \$1 million           | □ \$100,000,001 - \$500 million                | ☐ More than \$50 billion                         |
| If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Is/ Tanya H Kara  Tanya H Kara  Signature of Debtor 2  Signature of Debtor 1  Executed on August 2, 2016  Executed on  | Part   | 7: Sign Below                              |                      |                             |  |  |
| United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Is/ Tanya H Kara  Tanya H Kara  Signature of Debtor 2  Signature of Debtor 1  Executed on  August 2, 2016   | For  | you  | I have ex            | amined this petition, and I | declare under penalty of perjury that the inf  | formation provided is true and correct.          |
| document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Is/ Tanya H Kara  Tanya H Kara  Signature of Debtor 2  Signature of Debtor 1  Executed on August 2, 2016  Executed on  |  |  |                      |                             |  |  |
| I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Tanya H Kara  Tanya H Kara  Signature of Debtor 2  Signature of Debtor 1  Executed on  August 2, 2016  Executed on  |  |  | documen              | t, I have obtained and rea  | nd the notice required by 11 U.S.C. § 342(b).  |  |
| bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Tanya H Kara  Tanya H Kara  Signature of Debtor 1  Executed on August 2, 2016  Executed on Executed on   |  |  | I request            | relief in accordance with t | the chapter of title 11, United States Code, s | specified in this petition.                      |
| Tanya H Kara Signature of Debtor 2 Signature of Debtor 1  Executed on August 2, 2016  Executed on   |  |  | bankrupt<br>and 3571 | cy case can result in fines |  |  |
| Signature of Debtor 1  Executed on August 2, 2016 Executed on   |  |  |                      |                             | Signature of De                                | btor 2   |
| <u> </u>  |  |  |                      |                             | Signature of Do                                | <del></del>                                      |
| MM / DD / YYYY MM / DD / YYYY   |  |  | Executed             |                             |  |  |
|   |  |  |                      | MM / DD / YYYY              | ľ  | MM / UU / YYYY                                   |

Debtor 1 Tanya H Kara Document Page 7 of 40 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Thomas L. Murphy                        | Date          | August 2, 2016             |
|---|---------------|----------------------------|
| Signature of Attorney for Debtor            |               | MM / DD / YYYY             |
| Thomas L. Murphy Printed name               |               |                            |
| Petti Murphy & Associates Firm name         |               |                            |
| 1100 Ravinia Place<br>Orland Park, IL 60462 |               |                            |
| Number, Street, City, State & ZIP Code      |               |                            |
| Contact phone <b>708-403-5500</b>           | Email address | tmurphy@pettimurphylaw.com |
| 1998277                                     |               |                            |
| Bar number & State                          |               |                            |

| Debtor 1           | Tanya H Kara            |                   |             |  |
|--------------------|-------------------------|-------------------|-------------|--|
|                    | First Name              | Middle Name       | Last Name   |  |
| Debtor 2           |                         |                   |             |  |
| Spouse if, filing) | First Name              | Middle Name       | Last Name   |  |
| Jnited States Ba   | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |

☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets   |             |                           |
|-----|--|-------------|---------------------------|
|     |  |             | assets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 0.00                      |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 38,900.15                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 38,900.15                 |
| Par | 12: Summarize Your Liabilities   |             |                           |
|     |  |             | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D                 | \$          | 30,807.00                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | \$          | 0.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 107,269.27                |
|     | Your total liabilities   | \$          | 138,076.27                |
| Par | 3: Summarize Your Income and Expenses  |             |                           |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 3,395.46                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 3,380.41                  |
| Par | 4: Answer These Questions for Administrative and Statistical Records   |             |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                                     | ır other sc | chedules.                 |
| 7.  | Yes What kind of debt do you have?   |             |                           |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose." 11 U.S.C. & 101(8). Fill out lines 8.0g for statistical purposes. 28 U.S.C. & 150 |             |                           |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Page 9 of 40 Case number (if known) Debtor 1 Tanya H Kara

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

4,688.60 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Tota | l claim |
|--|------|---------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$   | 0.00    |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_  | 0.00    |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_  | 0.00    |
| 9d. Student loans. (Copy line 6f.)   | \$_  | 0.00    |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_  | 0.00    |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_ | 0.00    |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 0.00    |

|                     |  | Document                        | Page 10 of 40                    |  |   |
|---------------------|--|---------------------------------|----------------------------------|--|---|
| Fill in this info   | rmation to identify your case  | e and this filing:              |                                  |  |   |
| Debtor 1            | Tanya H Kara   |                                 |                                  |  |   |
|                     | First Name   | Middle Name                     | Last Name                        |  |   |
| Debtor 2            | - <u></u> -  |                                 |                                  |  |   |
| (Spouse, if filing) | First Name   | Middle Name                     | Last Name                        |  |   |
| United States E     | Bankruptcy Court for the: NO   | RTHERN DISTRICT OF ILL          | INOIS                            |  |   |
| C                   |  |                                 |                                  |  |   |
| Case number         |  |                                 |                                  |  | ☐ Check if this is an amended filing                        |
|                     |  |                                 |                                  |  | amonaea ming  |
|                     |  |                                 |                                  |  |   |
| Official F          | orm 106A/B   |                                 |                                  |  |   |
| Schedu              | le A/B: Proper   | tv                              |                                  |  | 12/15   |
|                     | , separately list and describe iter                                  |                                 | an accet fite in mare than an    | a actorony liet the accet in                         |   |
| hink it fits best.  | Be as complete and accurate as ore space is needed, attach a se      | possible. If two married peop   | le are filing together, both are | e equally responsible for su                         | pplying correct   |
| Part 1: Describ     | e Each Residence, Building, Lar                                      | nd, or Other Real Estate You O  | wn or Have an Interest In        |  |   |
| 1 Do you own o      | r have any legal or equitable inte                                   | rest in any residence building  | a land or similar property?      |  |   |
| i. Do you own o     | i flave any legal of equitable inte                                  | rest in any residence, building | g, iand, or similar property?    |  |   |
| No. Go to P         | art 2.   |                                 |                                  |  |   |
| ☐ Yes. Where        | e is the property?   |                                 |                                  |  |   |
|                     |  |                                 |                                  |  |   |
| Part 2: Describ     | e Your Vehicles  |                                 |                                  |  |   |
|                     | lrives. If you lease a vehicle, al                                   | ·                               |                                  |  |   |
| 3.1 Make:           | Mazda  | Who has an interest in t        | he property? Check one           | Do not deduct secured cla                            |   |
| Model:              | 3  | Debtor 1 only                   |                                  | the amount of any secure<br>Creditors Who Have Clair |   |
| Year:               | 2016   | Debtor 2 only                   |                                  |  |   |
| Approxim            | ate mileage: 6000  |                                 | only                             | Current value of the<br>entire property?             | Current value of the portion you own?                       |
| Other info          | ormation:  | At least one of the deb         | tors and another                 |  |   |
|                     | on: 5724 West 106th<br>#1E, Chicago Ridge IL                         | Check if this is comm           |                                  | \$23,000.00  | \$23,000.00   |
|                     | aircraft, motor homes, ATVs<br>pats, trailers, motors, personal      |                                 |                                  |  |   |
|                     | llar value of the portion you on the have attached for Part 2. Write |                                 |                                  |  | \$23,000.00   |
| Part 3: Describ     | e Your Personal and Household  | l Items                         |                                  |  |   |
|                     | r have any legal or equitable  |                                 | wing items?                      | 1  | Current value of the portion you own? On not deduct secured |
|                     | manda and from 1.11  |                                 |                                  |  | claims or exemptions.                                       |
| პ. Household (      | goods and furnishings  |                                 |                                  |  |   |

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

|        |            | Case 16-2  | 5020        | Doc 1                     | Filed 08/03/16<br>Document                     | Entered 0<br>Page 11 of | 08/03/16 19:04:49<br>40       | Desc Main                        |
|--------|------------|--|-------------|---------------------------|--|-------------------------|-------------------------------|----------------------------------|
| Debto  | or 1       | Tanya H Kara   |             |                           |  |                         | Case number (if known         |                                  |
|        | Yes.       | Describe   |             |                           |  |                         |                               |                                  |
|        |            |  |             |                           | lousehold goods arest 106th Street #1E,        |                         |                               | \$700.00                         |
|        | ampl<br>No | es: Televisions and  |             |                           | stereo, and digital equip<br>ia players, games | oment; computers        | , printers, scanners; music   | collections; electronic devices  |
|        |            |  |             | nics: TV an<br>n: 5724 We | d Kindle<br>est 106th Street #1E,              | Chicago Ridg            | e IL 60415                    | \$180.00                         |
| Ex.    | ampl<br>No | bles of value<br>es: Antiques and fi<br>other collection<br>Describe     |             |                           |  | oks, pictures, or o     | ther art objects; stamp, coi  | n, or baseball card collections; |
| Ex     | ampl       | ent for sports and<br>es: Sports, photogr<br>musical instrun<br>Describe | raphic, ex  |                           | ther hobby equipment;                          | bicycles, pool tab      | les, golf clubs, skis; canoes | and kayaks; carpentry tools;     |
|        | xamp<br>No |  | shotguns    | s, ammunition             | , and related equipment                        | t                       |                               |                                  |
|        | xamp<br>No | oles: Everyday clot  | hes, furs,  | leather coats             | s, designer wear, shoes,                       | , accessories           |                               |                                  |
|        | Yes.       |  |             |                           | y clothing of adult f<br>st 106th Street #1E,  |                         | e IL 60415                    | \$400.00                         |
|        | xamp<br>No |  | elry, costu | ume jewelry,              | engagement rings, wed                          | ding rings, heirloc     | m jewelry, watches, gems,     | gold, silver                     |
| E<br>■ | xamp<br>No | rm animals<br>oles: Dogs, cats, bi<br>Describe                           | rds, horse  | es                        |  |                         |                               |                                  |
|        | No         | her personal and Give specific infor                                     |             | -                         | ı did not already list, iı                     | ncluding any hea        | alth aids you did not list    |                                  |
|        |            |  | •           |                           | om Part 3, including a                         | •                       | ges you have attached         | \$1,280.00                       |

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured Case 16-25020 Doc 1 Filed 08/03/16 Entered 08/03/16 19:04:49 Desc Main Document Page 12 of 40

Case number (if known) Tanya H Kara Debtor 1 claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Checking Acct** \$300.00 #4281 Chase, 5705 95th St, Oak Lawn, IL 60453 17.1. American Airlines Credit Union, 10600 W **Checking Acct #** Higgins Rd, Rosemont, IL 60018 \$99.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Retirement **Department of Homeland Security** Unknown **Thrift Savings Plan Department of Homeland Security** \$13,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: ■ Yes. ..... **Security Deposit** \$875.00 Rent Location: Michelle Gubala, 5724 West 106th Street, Chicago Ridge IL 60415 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes.....

page 3

| De  |  | Case 16-2502   | 0 Doc 1   | Filed 08/03/16<br>Document   | Entered 08/03 Page 13 of 40   | 3/16 19:04:49                                     | Desc Main   |
|-----|--|--|---|--|---|---|---|
|     | ebtor 1  | Tanya H Kara   |   | Boodinone  |   | ase number (if known)                             |   |
| 24. |  | s in an education IRA<br>C. §§ 530(b)(1), 529A(b   |   | in a qualified ABLE pro  | gram, or under a qual   | ified state tuition pro                           | gram.   |
|     | ☐ Yes  | Institutio   | n name and desc   | cription. Separately file th   | e records of any interes  | sts.11 U.S.C. § 521(c):                           |   |
|     | ■ No   | equitable or future in Give specific information   |   | erty (other than anything  | g listed in line 1), and  | rights or powers exe                              | rcisable for your benefit   |
|     | Patents  | , copyrights, tradema  | arks, trade secre   | ets, and other intellectu<br>proceeds from royalties a   |   | s   |   |
|     | ■ No<br>□ Yes. (   | Give specific information  | on about them   |  |   |   |   |
|     | Exampl<br>■ No   |  | xclusive licenses   | ngibles<br>, cooperative association   | n holdings, liquor license  | es, professional licens                           | es  |
|     | ⊔ Yes. (   | Give specific information  | on about them   |  |   |   |   |
| Me  | oney or p  | property owed to you   | ?   |  |   |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refu<br>■ No   | unds owed to you   |   |  |   |   |   |
|     | ☐ Yes. 0   | Give specific informatio   | n about them, ind   | cluding whether you alrea  | ady filed the returns and   | I the tax years                                   |   |
|     | □ No   |  |   | usal support, child suppo  | ort, maintenance, divorc  | e settlement, property                            | settlement  |
|     |  |  |   | d support in the amo   | hter turns 18   |   |   |
|     |  |  |   |  | hter turns 18<br>ta, 808 Alcoa,   | Child Support                                     | \$346.15  |
|     | ■ No □ Yes. •  | benefits; unpaid lo  Give specific informations is in insurance policies   | es you<br>ability insurance<br>ans you made to<br>on  | bi-weekly until daug<br>Location: John Bilot<br>Melrose Park, IL 601<br>payments, disability bene<br>someone else                          | hter turns 18<br>tta, 808 Alcoa,<br>64<br>efits, sick pay, vacation                           | pay, workers' compe                               | nsation, Social Security  |
|     | ■ No □ Yes. •  | les: Unpaid wages, disabenefits; unpaid lo Give specific informations in insurance policies  | es you<br>ability insurance<br>ans you made to<br>on  | bi-weekly until daug<br>Location: John Bilot<br>Melrose Park, IL 601   | hter turns 18<br>tta, 808 Alcoa,<br>64<br>efits, sick pay, vacation                           | pay, workers' compe                               | nsation, Social Security  |
| 31. | ■ No □ Yes. •  Interest Exampl ■ No  | les: Unpaid wages, disc<br>benefits; unpaid lo<br>Give specific informations<br>is in insurance policientes: Health, disability, of<br>Name the insurance co | es you ability insurance ans you made to on es  | bi-weekly until daug<br>Location: John Bilot<br>Melrose Park, IL 601  payments, disability bene<br>someone else  health savings account (I | hter turns 18<br>tta, 808 Alcoa,<br>64<br>efits, sick pay, vacation                           | pay, workers' comper<br>er's, or renter's insurar | nsation, Social Security  |
| 31. | ■ No □ Yes. 0 Interest Exampl ■ No □ Yes. N  Any inte If you a someon ■ No | les: Unpaid wages, disc<br>benefits; unpaid lo<br>Give specific information<br>is in insurance policientles: Health, disability, of<br>Name the insurance co | es you ability insurance ans you made to on es or life insurance; h mpany of each p Company name: is due you from living trust, expec | bi-weekly until daug<br>Location: John Bilot<br>Melrose Park, IL 601  payments, disability bene<br>someone else  health savings account (I | hter turns 18 tta, 808 Alcoa, 64 efits, sick pay, vacation HSA); credit, homeowne Beneficiary | pay, workers' comperers, or renter's insurar      | nsation, Social Security  nce  Surrender or refund value:                         |

| Debt         | or 1            | Case 16-25020<br>Tanya H Kara   | Doc 1            | Filed 08/03/16<br>Document    | Entered 08<br>Page 14 of | 3/03/16 19:04:49<br>40<br>Case number (if known) | Desc Main        |
|--------------|-----------------|---|------------------|-------------------------------|--------------------------|--|------------------|
|              |                 |   |                  |                               |                          | ,  |                  |
|              | _               | contingent and unliquidate  | ed claims of     | every nature, includin        | g counterclaims o        | of the debtor and rights to                      | set off claims   |
|              | No              |   |                  |                               |                          |  |                  |
|              | Yes.            | Describe each claim   |                  |                               |                          |  |                  |
| 35. <b>A</b> | ny fin          | ancial assets you did not   | already list     |                               |                          |  |                  |
|              | No              |   |                  |                               |                          |  |                  |
|              | Yes.            | Give specific information   |                  |                               |                          |  |                  |
|              |                 |   |                  |                               |                          | 1  |                  |
| 36.          |                 | he dollar value of all of your control of the deliant |                  | , ,                           | , , ,                    |  | \$14,620.15      |
|              | 101 F           | art 4. Write that number he   | :: E             |                               |                          |  |                  |
| Part         | 5: De:          | scribe Any Business-Related   | Property You     | Own or Have an Interest I     | n. List any real esta    | te in Part 1.                                    |                  |
| 37. <b>D</b> | o you d         | own or have any legal or equi   | table interest i | in any business-related p     | roperty?                 |  |                  |
|              | No. Go          | to Part 6.  |                  |                               |                          |  |                  |
|              | Yes. G          | Go to line 38.  |                  |                               |                          |  |                  |
|              |                 |   |                  |                               |                          |  |                  |
| Part         |                 | scribe Any Farm- and Comme<br>ou own or have an interest in fa  |                  |                               | n or Have an Interes     | it In.   |                  |
| 46 F         | o vou           | ı own or have any legal or  | equitable in     | terest in any farm- or o      | commercial fishin        | g-related property?                              |                  |
|              |                 | Go to Part 7.   | equitable iii    | torost in any larin or t      |                          | g related property.                              |                  |
|              | _               | . Go to line 47.  |                  |                               |                          |  |                  |
| !            | <b>–</b> 163    | . Go to line 47.  |                  |                               |                          |  |                  |
| Part         | 7:              | Describe All Property You   | Own or Have a    | n Interest in That You Dic    | Not List Above           |  |                  |
| F2 F         | <b>\</b>        | have other property of a  | av kind var.     | كنونا براد والاو والراد الواد |                          |  |                  |
|              |                 | have other property of an oles: Season tickets, country   |                  |                               |                          |  |                  |
|              | l <sub>No</sub> | •   | ,                | •                             |                          |  |                  |
|              | Yes.            | Give specific information   |                  |                               |                          |  |                  |
|              |                 |   |                  |                               |                          | i  |                  |
| 54.          | Add t           | he dollar value of all of yo  | our entries fr   | om Part 7. Write that n       | umber here               |  | \$0.00           |
|              |                 |   |                  |                               |                          | ı  |                  |
| Part         | 8:              | List the Totals of Each Part  | of this Form     |                               |                          |  |                  |
| 55.          | Part 1          | l: Total real estate, line 2  |                  |                               |                          |  | \$0.00           |
|              |                 | 2: Total vehicles, line 5   |                  |                               | \$23,000.00              |  | Ψ0.00            |
|              |                 | 3: Total personal and hous  | sehold items     | line 15                       | \$1,280.00               |  |                  |
|              |                 | l: Total financial assets, li   |                  |                               | \$14,620.15              |  |                  |
|              |                 | 5: Total business-related p   |                  | <u> </u>                      | \$0.00                   |  |                  |
|              |                 | 6: Total farm- and fishing-   |                  |                               | \$0.00                   |  |                  |
|              |                 | 7: Total other property not   |                  |                               | \$0.00                   |  |                  |
|              |                 |   |                  |                               |                          |  |                  |
| 62.          | Total           | personal property. Add lin  | nes 56 through   | h 61                          | \$38,900.15              | Copy personal property to                        | otal \$38,900.15 |
| 63.          | Total           | of all property on Schedu   | ıle A/B. Add I   | ine 55 + line 62              |                          |  | \$38,900.15      |

Official Form 106A/B Schedule A/B: Property page 5

|                     |                          |                   | 111 1 1000 10 01 40 |  |
|---------------------|--------------------------|-------------------|---------------------|--|
| Fill in this infor  | rmation to identify your | case:             |                     |  |
| Debtor 1            | Tanya H Kara             |                   |                     |  |
|                     | First Name               | Middle Name       | Last Name           |  |
| Debtor 2            |                          |                   |                     |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name           |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS         |  |
| Case number         |                          |                   |                     |  |
| (if known)          |                          |                   |                     |  |
|                     |                          |                   |                     |  |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Pro | perty You | Claim as | s Exempt |
|---------|----------|---------|-----------|----------|----------|
|---------|----------|---------|-----------|----------|----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property   |                     | portion you own                     |     | Specific laws that allow exemption                              |                       |
|---|---------------------|-------------------------------------|-----|---|-----------------------|
|   |                     | Copy the value from<br>Schedule A/B | Che | eck only one box for each exemption.                            |                       |
| Household: Misc House and furnishing of apartn                                    | •                   | \$700.00                            |     | \$700.00  | 735 ILCS 5/12-1001(b) |
| Location: 5724 West 106<br>#1E, Chicago Ridge IL 6<br>Line from Schedule A/B: 6.1 | 6th Street<br>60415 |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| Electronics: TV and Kin<br>Location: 5724 West 100                                |                     | \$180.00                            |     | \$180.00  | 735 ILCS 5/12-1001(b) |
| #1E, Chicago Ridge IL 6 Line from Schedule A/B: 7.1                               | 0415                |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| Clothes: Necessary clot   | thing of adult      | \$400.00                            |     | \$400.00  | 735 ILCS 5/12-1001(a) |
| Location: 5724 West 106<br>#1E, Chicago Ridge IL 6<br>Line from Schedule A/B: 11. | 0415                |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| Checking Acct #4281: C<br>95th St. Oak Lawn. IL 60                                | •                   | \$300.00                            |     | \$300.00  | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 17.   |                     |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |
| Checking Acct #: Ameri<br>Credit Union, 10600 W F                                 |                     | \$99.00                             |     | \$99.00   | 735 ILCS 5/12-1001(b) |
| Rosemont, IL 60018 Line from Schedule A/B: 17.                                    | ,                   |                                     |     | 100% of fair market value, up to any applicable statutory limit |                       |

Case 16-25020 Doc 1 Filed 08/03/16 Entered 08/03/16 19:04:49 Desc Main Document Page 16 of 40 Tanya H Kara Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Retirement: Department of Homeland** 735 ILCS 5/12-1006 Unknown \$0.00 Security 100% of fair market value, up to Line from Schedule A/B: 21.1 any applicable statutory limit Thrift Savings Plan: Department of 735 ILCS 5/12-1006 \$13,000.00 \$13,000.00 **Homeland Security** Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit **Rent: Security Deposit** 735 ILCS 5/12-1001(b) \$875.00 \$875.00 Location: Michelle Gubala, 5724 West 106th Street, Chicago Ridge IL 60415 100% of fair market value, up to Line from Schedule A/B: 22.1 any applicable statutory limit Child Support: Child support in the 735 ILCS 5/12-1001(g)(4) \$346.15 \$346.15 amount of \$346.15 bi-weekly until daughter turns 18 100% of fair market value, up to Location: John Bilotta, 808 Alcoa, any applicable statutory limit Melrose Park, IL 60164 Line from Schedule A/B: 29.1

| 3. | you claiming a homestead exemption of more than \$160,375? bject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) |
|----|---|
|    | No  |
|    | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  |
|    | □ No  |
|    | □ Yes   |

|  |  | Document Pa  | iae 17 of 40                                   |  |   |                             |
|--|--|--|--|--|---|-----------------------------|
| Fill in this i   | nformation to identify you   |  |  |  |   |                             |
| Debtor 1   | Tanya H Kara First Name  | Middle Name Last   | Name   |  |   |                             |
| Debtor 2<br>(Spouse if, filing   | j) First Name  | Middle Name Last   | Name   |  |   |                             |
| United State   | es Bankruptcy Court for the  | : NORTHERN DISTRICT OF ILLINOIS  | S  |  |   |                             |
| Case numb  | er   |  |  |  | _   | if this is an<br>led filing |
|  | Form 106D<br>ule D: Creditors  | s Who Have Claims Sec  | cured by F                                     | Property   | '   | 12/15                       |
|  | py the Additional Page, fill it  | If two married people are filing together, bo<br>out, number the entries, and attach it to this  |  |  |   |                             |
| D  | ditors have claims secured b   | v vour proporty?   |  |  |   |                             |
| □ No. 0  |  | his form to the court with your other sche   | dules. You have n                              | othing else to re                                | port on this form.  |                             |
| ☐ No. (☐ Yes.  Part 1: L  2. List all set for each claim   | Check this box and submit to Fill in all of the information ist All Secured Claims cured claims. If a creditor has not if more than one creditor has   | his form to the court with your other sche   | separately Column                              | n A Cont of claim deduct the                     | olumn B<br>alue of collateral<br>at supports this         | Column C Unsecured portion  |
| ☐ No. (☐ Yes.  Part 1: L  2. List all set for each clain much as poss  | Check this box and submit to Fill in all of the information sist All Secured Claims cured claims. If a creditor has all functions in alphabet sible, list the claims in alphabet   | his form to the court with your other sche below.  more than one secured claim, list the creditor s s a particular claim, list the other creditors in Pa   | reparately art 2. As Amou Do not value o       | n A Cont of claim Vandeduct the the foollateral. | olumn B<br>alue of collateral<br>lat supports this<br>aim | Unsecured portion If any    |
| ☐ No. (☐ Yes.  Part 1: L  2. List all set for each clain much as poss  | Check this box and submit to Fill in all of the information sist All Secured Claims cured claims. If a creditor has not all the claims in alphabet a   | his form to the court with your other sche below.  more than one secured claim, list the creditor s s a particular claim, list the other creditors in Paical order according to the creditor's name.   | ceparately art 2. As Amou Do not value e aim:  | n A Cont of claim deduct the                     | olumn B<br>alue of collateral<br>at supports this         | Unsecured portion           |
| No. 0 Yes.  Part 1: L  2. List all set for each clain much as poss  2.1 Mazd  Creditor   | Check this box and submit to Fill in all of the information sist All Secured Claims cured claims. If a creditor has not all the claims in alphabet a   | his form to the court with your other sche below.  more than one secured claim, list the creditor s s a particular claim, list the other creditors in Paical order according to the creditor's name.  Describe the property that secures the claim according to the creditor's name.  2016 Mazda 3 6000 miles Location: 5724 West 106th Stree  | ceparately art 2. As Amou Do not value e aim:  | n A Cont of claim Vandeduct the the follateral.  | olumn B<br>alue of collateral<br>lat supports this<br>aim | Unsecured portion If any    |
| Part 1: L  2. List all set for each claim much as poss  2.1 Mazd  Creditor  PO B Phoe Number   | Check this box and submit to Fill in all of the information sist All Secured Claims cured claims. If a creditor has sible, list the claims in alphabet a s Name  ox 78069 nix, AZ 85062  Street, City, State & Zip Code  | his form to the court with your other sche below.  more than one secured claim, list the creditor's a particular claim, list the other creditors in Paccal order according to the creditor's name.  Describe the property that secures the claim 2016 Mazda 3 6000 miles Location: 5724 West 106th Stree #1E, Chicago Ridge IL 60415  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed  | ceparately art 2. As Amou Do not value e aim:  | n A Cont of claim Vandeduct the the follateral.  | olumn B<br>alue of collateral<br>lat supports this<br>aim | Unsecured portion If any    |
| Postorial No. ( No. ( Yes.  Yes.  2. List all set for each clain much as poss  2.1 Mazd  Creditor  POB Phoe Number  Who owes t   | Check this box and submit to Fill in all of the information ist All Secured Claims  Cured claims. If a creditor has an if more than one creditor has isble, list the claims in alphabet as Name  OX 78069  nix, AZ 85062  Street, City, State & Zip Code  The debt? Check one. | his form to the court with your other sche below.  more than one secured claim, list the creditor's is a particular claim, list the other creditors in Paical order according to the creditor's name.  Describe the property that secures the claimacter of the property o | ceparately art 2. As Amou Do not value of aim: | n A Cont of claim Vandeduct the the follateral.  | olumn B<br>alue of collateral<br>lat supports this<br>aim | Unsecured portion If any    |
| Postor 1 conditions of the con | Check this box and submit to Fill in all of the information ist All Secured Claims  Cured claims. If a creditor has an if more than one creditor has isble, list the claims in alphabet as Name  OX 78069  nix, AZ 85062  Street, City, State & Zip Code  The debt? Check one. | his form to the court with your other sche below.  more than one secured claim, list the creditor s is a particular claim, list the other creditors in Paical order according to the creditor's name.  Describe the property that secures the claim is: Check apply.  As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgater loan)  Statutory lien (such as tax lien, mechanical Judgment lien from a lawsuit   | column Amou Do not value of aim:  t all that   | n A Cont of claim Vandeduct the the follateral.  | olumn B<br>alue of collateral<br>lat supports this<br>aim | Unsecured portion If any    |

Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$30,807.00

\$30,807.00

|  |   | Document  | Page 1   | 3 of 40   |  |
|--|---|---|--|---|--|
| Fill in this   | s information to identify your  | case:   |  |   |  |
| Debtor 1   | Tanya H Kara  |   |  |   |  |
|  | First Name  | Middle Name   | Last Name  |   |  |
| Debtor 2<br>(Spouse if, fi                             | ing) First Name   | Middle Name   | Last Name  |   |  |
| United Sta   | ates Bankruptcy Court for the:  | NORTHERN DISTRICT OF ILL  | INOIS  |   |  |
| Case num<br>(if known)                                 | nber  |   |  | I   | ☐ Check if this is an amended filing   |
| Sched  |   | /ho Have Unsecured  |  |   | 12/15  |
| any execut<br>Schedule G<br>Schedule D<br>left. Attach | ory contracts or unexpired leases<br>Executory Contracts and Unexp<br>Creditors Who Have Claims Sec<br>the Continuation Page to this pag<br>case number (if known). | that could result in a claim. Also li<br>bired Leases (Official Form 106G). D<br>sured by Property. If more space is r<br>ge. If you have no information to rep | st executory of<br>o not include<br>needed, copy t | Part 2 for creditors with NONPRIORITY ontracts on Schedule A/B: Property (any creditors with partially secured cithe Part you need, fill it out, number the not file that Part. On the top of any | Official Form 106A/B) and on aims that are listed in the entries in the boxes on the |
| Part 1:  | List All of Your PRIORITY Ur  |   |  |   |  |
|  | y creditors have priority unsecure  | ed claims against you?  |  |   |  |
|  | . Go to Part 2.   |   |  |   |  |
| ☐ Ye   |   |   |  |   |  |
|  | List All of Your NONPRIORIT   |   |  |   |  |
| 3. Do an   | y creditors have nonpriority unse   | cured claims against you?   |  |   |  |
| ☐ No   | You have nothing to report in this p  | part. Submit this form to the court with  | your other sche                                    | edules.   |  |
| Yes  | S.  |   |  |   |  |
| unsecu   | ured claim, list the creditor separatel   | y for each claim. For each claim listed   | , identify what t                                  | holds each claim. If a creditor has more ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill or   | dy included in Part 1. If more   |
|  |   |   |  |   | Total claim  |
| 4.1 <b>C</b>   | hase  | Last 4 digits of acco   | ount number  | 2882  | \$525.46   |
|  | onpriority Creditor's Name  O Box 15298   | When was the debt   | incurred?  | 4/2016  |  |
|  | /ilmington, DE 19850<br>umber Street City State Zlp Code  | As of the date you f  | ilo tho claim i                                    | s: Check all that apply   |  |
|  | ho incurred the debt? Check one.  | As of the date you i  | ile, tile cialili i                                | S. Check all that apply   |  |
| _  | Debtor 1 only   | ☐ Contingent  |  |   |  |
|  | Debtor 2 only   | ☐ Unliquidated  |  |   |  |
|  | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |   |  |
|  | At least one of the debtors and an  | other Type of NONPRIOR  | ITY unsecured                                      | d claim:  |  |
|  | Check if this claim is for a com  | munity  |  |   |  |
|  | ebt<br>the claim subject to offset?   | Obligations arisin report as priority clair   |  | ration agreement or divorce that you did  | not  |
| _  | No  |   |  | g plans, and other similar debts  |  |
|  | • no<br>] <sub>Yes</sub>  | •   | •  | 91  |  |
| L  | ı res   | Other. Specify  | Cieuit Cafu  | uent  |  |

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Debtor 1 Tanya H Kara Case number (if know) 4.2 \$3,337.60 Chase Last 4 digits of account number 9060 Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? 1/2016 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card debt ☐ Yes 4.3 Chase Last 4 digits of account number onDr \$84,473.42 Nonpriority Creditor's Name 3415 Vision Dr When was the debt incurred? 2016 Columbus, OH 43219 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No  $\Pi$  Yes **Deficiency Judgment Foreclosure** 4.4 Citibank Last 4 digits of account number 9963 \$162.18 Nonpriority Creditor's Name **Box 6500** When was the debt incurred? 2015 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card debt ☐ Yes

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Debtor 1 Tanya H Kara Case number (if know) 4.5 \$7,754.56 Citibank Last 4 digits of account number 1405 Nonpriority Creditor's Name Box 6500 When was the debt incurred? 1/2016 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card debt ☐ Yes 4.6 Dorothy A. Styx Ltd Last 4 digits of account number Kara \$6,179.16 Nonpriority Creditor's Name 2559 Flossmoor Road When was the debt incurred? 2014-2016 Flossmoor, IL 60422 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No  $\Pi$  Yes Attorney fees - paternity Other. Specify 4.7 Foot & Ankle Associates LTD Last 4 digits of account number \$150.00 3617 Nonpriority Creditor's Name 4650 Southwest Highway When was the debt incurred? 05/28/2015 Oak Lawn, IL 60453 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical services** Other. Specify

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Debtor 1 Tanya H Kara Case number (if know) 4.8 \$1,116.48 Kohls Last 4 digits of account number 1803 Nonpriority Creditor's Name PO Box 3043 When was the debt incurred? 4/2016 Milwaukee, WI 53201-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card debt ☐ Yes 4.9 **Midland Oral Surgery** \$425.00 Last 4 digits of account number 9372 Nonpriority Creditor's Name 4435 W 95th St When was the debt incurred? 6/2016 Oak Lawn, IL 60453 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical services** Other. Specify 4.1 **Old Navy Visa** 3816 \$2,482.58 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 960017 When was the debt incurred? 4/2016 Orlando, FL 32896-0017 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card debt ☐ Yes

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Debtor 1 Tanya H Kara Case number (if know) 4.1 Randy Franklin Esq 1767 \$662.83 Last 4 digits of account number Nonpriority Creditor's Name 321 N. Clark 5th floor 09/7/2015 When was the debt incurred? Chicago, IL 60654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Attorney Fees - guardian ad litem ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Eagle Recovery ☐ Part 1: Creditors with Priority Unsecured Claims 2601 W Forrest Hill Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Peoria, IL 61604 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Heavner & Assoc** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740 Part 2: Creditors with Nonpriority Unsecured Claims Decatur, IL 62523 Last 4 digits of account number 3258 Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only, 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6а 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6b. 0.00 Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f. 0.00 Total claims 6g. Obligations arising out of a separation agreement or divorce that from Part 2 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h 6h 0.00 6i Other. Add all other nonpriority unsecured claims. Write that amount 6i. 107.269.27 here.

6j.

Total Nonpriority, Add lines 6f through 6i.

107,269.27

|                     |                          |                   | 111 FAUC 23 01 40 |  |
|---------------------|--------------------------|-------------------|-------------------|--|
| Fill in this infor  | mation to identify your  | case:             |                   |  |
| Debtor 1            | Tanya H Kara             |                   |                   |  |
|                     | First Name               | Middle Name       | Last Name         |  |
| Debtor 2            |                          |                   |                   |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name         |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS       |  |
| Case number         |                          |                   |                   |  |
| (if known)          |                          |                   |                   |  |
|                     |                          |                   |                   |  |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for                        |
|--|--|
| 2.1 Michelle Gubala<br>5724 west 106th street<br>Chicago Ridge, IL 60415                                     | I do not have a lease and current with month to month payment. |

| <u> </u>                        | 430 10 20020  | Docume  | nt Page 24 of                                    | 10/00/10 13:04: <sup>1</sup>                         | TO DOOO WA                                     |                  |
|---------------------------------|---|---|--|--|--|------------------|
| Fill in this info               | rmation to identify your                                  |   |  |  |  |                  |
| Debtor 1                        | Tanya H Kara  |   |  |  |  |                  |
| Dahtano                         | First Name  | Middle Name   | Last Name  |  |  |                  |
| Debtor 2<br>(Spouse if, filing) | First Name  | Middle Name   | Last Name  |  |  |                  |
| United States B                 | ankruptcy Court for the:                                  | NORTHERN DISTRICT   | OF ILLINOIS                                      |  |  |                  |
| Case number                     |   |   |  |  |  |                  |
| (if known)                      |   |   |  |  | ☐ Check if the characteristic controls amended |                  |
| Schedule                        | orm 106H  H: Your Cod                                     |   |  |  |  | 12/15            |
| people are filing               | g together, both are equi<br>umber the entries in the     | re also liable for any debt<br>ally responsible for supp<br>boxes on the left. Attach<br>. Answer every question. | lying correct information the Additional Page to | on. If more space is n                               | eeded, copy the Add                            | ditional Page,   |
| 1. Do you l                     | have any codebtors? (If y                                 | you are filing a joint case, d  | do not list either spouse a                      | as a codebtor.                                       |  |                  |
| □ No                            |   |   |  |  |  |                  |
| Yes                             |   |   |  |  |  |                  |
|                                 |   | ı lived in a community pro<br>Nevada, New Mexico, Pue   |  | ` ' ' '  | states and territories                         | s include        |
| ■ No. Go t                      | o line 3.   |   |  |  |  |                  |
| ☐ Yes. Did                      | your spouse, former spou                                  | use, or legal equivalent live   | with you at the time?                            |  |  |                  |
| in line 2 ag                    | gain as a codebtor only i<br>o), Schedule E/F (Official   | ors. Do not include your of<br>that person is a guarant<br>Form 106E/F), or Schedu                                | or or cosigner. Make s                           | ure you have listed th                               | e creditor on Sched                            | dule D (Official |
|                                 | mn 1: Your codebtor<br>Number, Street, City, State and ZI | P Code  |  | Column 2: The cre<br>Check all schedule              | ditor to whom you o                            | owe the debt     |
| 808                             | n Bilotta<br>Alcoa<br>ose Park, IL 60164                  |   |  | ☐ Schedule D, lin ■ Schedule E/F, ☐ Schedule G Chase | line <b>4.3</b>                                |                  |

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| E:II        | in this information to identify you   |  |  |             |       | 1            |            |                        |                           |          |
|-------------|---|--|--|-------------|-------|--------------|------------|------------------------|---------------------------|----------|
|             | in this information to identify you otor 1 Tanya H I  |  |  |             |       |              |            |                        |                           |          |
| Del         | otor 2  |  |  |             | _     |              |            |                        |                           |          |
|             | ted States Bankruptcy Court for   | the: NORTHERN DISTRI                                     | CT OF ILLINOIS                                     |             |       |              |            |                        |                           |          |
| (If kr      | se number<br>nown)  |  | _  |             | _     | □ An         |            | ed filing<br>ent showi | ng postpetition           |          |
|             | fficial Form 106I   |  |  |             |       | MN           | M / DD/ Y  | YYYY                   |                           |          |
| S           | chedule I: Your In  | come   |  |             |       |              |            |                        |                           | 12/15    |
| spo<br>atta | plying correct information. If y use. If you are separated and y ch a separate sheet to this for the thing the thing beautiful Describe Employment. | our spouse is not filing w<br>m. On the top of any addit | rith you, do not inclu                             | de infori   | nati  | on about     | your spo   | ouse. If m             | nore space is             | needed,  |
|             | Fill in your employment information.  |  | Debtor 1   |             |       |              | Debtor 2   | 2 or non-1             | filing spouse             |          |
|             | If you have more than one job, attach a separate page with information about additional employers.  | Employment status  | ■ Employed   |             |       |              | ☐ Employed |                        |                           |          |
|             |   | Employment status  | ☐ Not employed                                     |             |       |              | ☐ Not e    | mployed                |                           |          |
|             |   | Occupation   | Coordination Co                                    | enter O     | ffice | er           |            |                        |                           |          |
|             | Include part-time, seasonal, or self-employed work.   | Employer's name  | Transportation Security Administration             |             |       |              |            |                        |                           |          |
|             | Occupation may include stude or homemaker, if it applies.   | nt<br>Employer's address                                 | Human Resourc<br>2650 Park Towe<br>Vienna, VA 2218 | r Drive     |       |              |            |                        |                           |          |
|             |   | How long employed  | there? 8 Years                                     | , 6 Mor     | ths   |              | _          |                        |                           |          |
| Par         | t 2: Give Details About M   | Monthly Income   |  |             |       |              |            |                        |                           |          |
|             | mate monthly income as of the use unless you are separated.   | e date you file this form. If                            | you have nothing to re                             | eport for   | any   | line, write  | \$0 in the | space. In              | nclude your no            | n-filing |
|             | u or your non-filing spouse have<br>e space, attach a separate sheet  |  | ombine the information                             | n for all e | emple | oyers for th | hat perso  | on on the              | lines below. If           | you need |
|             |   |  |  |             |       | For Debt     | tor 1      |                        | ebtor 2 or<br>ling spouse |          |
| 2.          | List monthly gross wages, s deductions). If not paid month  |  |  | 2.          | \$    | 3,4          | 456.79     | \$                     | N/A                       | _        |
| 3.          | Estimate and list monthly ov  | ertime pay.  |  | 3.          | +\$   | 2            | 216.67     | +\$                    | N/A                       | _        |
|             | Coloulate aveca Incom:  | d line 2 + line 2  |  | 4           | ¢.    | 2.07         | 2.40       | · ·                    | NI/A                      | 1        |

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| Deb | tor 1                      | Tanya H Kara   | -         | (   | Case        | number (if kr | nown)       |      |                    |                  |          |
|-----|----------------------------|--|-----------|-----|-------------|---------------|-------------|------|--------------------|------------------|----------|
|     |                            |  |           |     | For         | Debtor 1      |             |      | Debtor<br>filing s | 2 or<br>pouse    |          |
|     | Cop                        | by line 4 here   | 4.        |     | \$          | 3,673         | 3.46        | \$   |                    | N/A              |          |
| 5.  | List                       | t all payroll deductions:  |           |     |             |               |             |      |                    |                  |          |
| •   | 5a.                        | Tax, Medicare, and Social Security deductions  | 58        | a.  | \$          | 680           | ).25        | \$   |                    | N/A              |          |
|     | 5b.                        | Mandatory contributions for retirement plans   | 5k        |     | <b>\$</b> - |               | 5.91        | \$   |                    | N/A              | -        |
|     | 5c.                        | Voluntary contributions for retirement plans   | 50        | c.  | \$          |               | 3.33        | \$   |                    | N/A              | -        |
|     | 5d.                        | Required repayments of retirement fund loans   | 50        | d.  | \$          | C             | 0.00        | \$   |                    | N/A              | -        |
|     | 5e.                        | Insurance  | 56        | е.  | \$_         | 197           | <b>7.23</b> | \$   |                    | N/A              |          |
|     | 5f.                        | Domestic support obligations   | 5f        |     | \$          |               | 0.00        | \$   |                    | N/A              | -        |
|     | 5g.                        | Union dues   | 50        | -   | \$_         |               | 0.00        | \$   |                    | N/A              |          |
|     | 5h.                        | <u> </u>   | _ 5r<br>_ | h.+ | \$_         | 15            | 5.28        | + \$ |                    | N/A              |          |
| 6.  | Add                        | d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.        |     | \$_         | 1,028         | 3.00        | \$   |                    | N/A              | -        |
| 7.  | Cal                        | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.        |     | \$          | 2,645         | 5.46        | \$   |                    | N/A              | =        |
| 8.  | List<br>8a.                | t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total              |           |     |             |               |             |      |                    |                  |          |
|     |                            | monthly net income.  | 88        | a.  | \$          | C             | 00.0        | \$   |                    | N/A              |          |
|     | 8b.                        | Interest and dividends   | 8k        | b.  | \$_         | C             | 0.00        | \$   |                    | N/A              | _        |
|     | 8c.                        | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 80        |     | \$          |               | 0.00        | \$   |                    | N/A              | _        |
|     | 8d.                        | . ,  | 80        |     | \$_         |               | 0.00        | \$   |                    | N/A              |          |
|     | 8e.                        | Social Security  | 86        | е.  | \$_         |               | 0.00        | \$   |                    | N/A              |          |
|     | 8f.                        | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:    | 8f        | f.  | \$          |               | 0.00        | \$   |                    | N/A              |          |
|     | 8g.                        | Pension or retirement income   | 86        | -   | \$_         |               | 0.00        | \$   |                    | N/A              | -        |
|     | 8h.                        | Other monthly income. Specify:   | _ 8h      | h.+ | \$_         |               | 0.00        | + \$ |                    | N/A              |          |
| 9.  | Add                        | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.        |     | §           | 750           | 0.00        | \$   |                    | N/A              |          |
| 10  | Cal                        | culate monthly income. Add line 7 + line 9.  | 10.       | \$  |             | 3,395.46      | + \$        |      | N/A                | = \$             | 3,395.46 |
| 10. |                            | If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.       | Ψ-  |             | 3,393.40      | ·   • -     |      | 17/7               | ] <sup>•</sup> - | 3,333.40 |
| 11. | Star<br>Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify: | dep       |     | •           | •             |             |      | chedule<br>11.     |                  | 0.00     |
| 12. | Wri                        | d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certainlies  |           |     |             |               |             |      | 12.                | \$               | 3,395.46 |
| 13. | Do                         | you expect an increase or decrease within the year after you file this form No.  | ?         |     |             |               |             |      |                    | Combii<br>monthl | y income |
|     |                            | Vaa Euglaia. I   |           |     |             |               |             |      |                    |                  |          |

Official Form 106I Schedule I: Your Income page 2

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|             | in this informe          | tion to identify yo                  | our caca:              |  |                       | Ī               |                                    |   |
|-------------|--------------------------|--------------------------------------|------------------------|--|-----------------------|-----------------|------------------------------------|---|
|             |                          |                                      |                        |  |                       | Ole e i         | , if this in:                      |   |
| Debt        | IUI I                    | Tanya H Kar                          | a                      |  |                       |                 | c if this is:<br>An amended filing |   |
| 1           | tor 2                    |                                      |                        |  |                       |                 |                                    | ving postpetition chapter the following date: |
| (Spc        | ouse, if filing)         |                                      |                        |  |                       |                 | is expenses as or                  | the following date:                           |
| Unite       | ed States Bankr          | uptcy Court for the                  | NORTH                  | HERN DISTRICT OF ILLIN                                       | OIS                   | <u> </u>        | MM / DD / YYYY                     |   |
| 1           | e number<br>nown)        |                                      |                        |  |                       |                 |                                    |   |
| Of          | ficial Fo                | rm 106J                              |                        |  |                       |                 |                                    |   |
| Sc          | chedule                  | J: Your                              | Exper                  | nses   |                       |                 |                                    | 12/1  |
| Be a        | as complete a            | and accurate as                      | possible<br>eded, atta | . If two married people ar<br>ich another sheet to this      |                       |                 |                                    |   |
| Part        |                          | ibe Your House                       | hold                   |  |                       |                 |                                    |   |
| 1.          | Is this a join           |                                      |                        |  |                       |                 |                                    |   |
|             | ■ No. Go to              |                                      | n a sonar              | ate household?   |                       |                 |                                    |   |
|             | □ res. <b>Doe</b>        |                                      | п а зера               | ate nousenoiu:   |                       |                 |                                    |   |
|             |                          |                                      | st file Offic          | al Form 106J-2, Expenses                                     | s for Separate House  | ehold of Debto  | or 2.                              |   |
| 2.          | Do vou have              | e dependents?                        | □ No                   |  |                       |                 |                                    |   |
|             | Do not list Do Debtor 2. | •                                    | Yes.                   | Fill out this information for each dependent                 | Dependent's relati    |                 | Dependent's age                    | Does dependent live with you?                 |
|             | Do not state             | the                                  |                        |  |                       |                 |                                    | □ No  |
|             | dependents               | names.                               |                        |  | daughter              |                 | 2.5                                | Yes   |
|             |                          |                                      |                        |  |                       |                 |                                    | □ No<br>□ Yes                                 |
|             |                          |                                      |                        |  |                       |                 |                                    | ☐ Yes   |
|             |                          |                                      |                        |  |                       |                 |                                    | ☐ Yes   |
|             |                          |                                      |                        |  |                       |                 |                                    | □ No  |
|             |                          |                                      |                        |  |                       |                 |                                    | ☐ Yes   |
| 3.          |                          | enses include<br>f people other t    | han <b>I</b>           | No   |                       |                 |                                    |   |
|             |                          | d your depende                       |                        | Yes  |                       |                 |                                    |   |
| Part        | 2: Estim                 | ate Your Ongoi                       | na Month               | lv Expenses  |                       |                 |                                    |   |
| Esti<br>exp | imate your ex            | penses as of yo                      | our bankr              | uptcy filing date unless y<br>y is filed. If this is a supp  |                       |                 |                                    |   |
| the         |                          | n assistance an                      |                        | government assistance i<br>cluded it on <i>Schedule I:</i> \ |                       |                 | Your exp                           | enses   |
| •           |                          | ,                                    |                        |  |                       |                 |                                    |   |
| 4.          |                          | r home owners<br>ad any rent for the |                        | ses for your residence. I<br>or lot.                         | nclude first mortgage | 4. \$           |                                    | 875.00  |
|             | If not includ            | ed in line 4:                        |                        |  |                       |                 |                                    |   |
|             | 4a. Real e               | state taxes                          |                        |  |                       | 4a. \$          |                                    | 0.00  |
|             | •                        | rty, homeowner's                     | -                      |  |                       | 4b. \$          |                                    | 0.00  |
|             |                          |                                      |                        | upkeep expenses  |                       | 4c. \$          |                                    | 50.00   |
| 5.          |                          | owner's associat<br>nortgage payme   |                        | dominium dues<br><b>our residence,</b> such as ho            | me equity loans       | 4d. \$<br>5. \$ |                                    | 0.00  |
| ٠.          |                          |                                      | y ·                    | <del></del>  | oquity lourio         | σ. ψ            |                                    | 0.00  |

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| Tanya H Kara  | Case num  | ber (if known)   |  |
|---|---|--|--|
| litiae:   |   |  |  |
|   | 6a.   | \$   | 40.00  |
| •   |   | ·  | 0.00   |
|   |   | ·  | 200.00   |
|   |   | ·  | 0.00   |
|   |   | ·  | 500.00   |
| . •   |   | ·  | 600.00   |
|   |   | ·  |  |
|   |   | ·  | 120.00   |
| •   |   | ·  | 40.00  |
| •   | 11.   | \$   | 30.00  |
|   | 12  | \$   | 250.00   |
|   |   | ·  | 0.00   |
|   |   | ·  |  |
|   | 14.   | Φ  | 0.00   |
|   |   |  |  |
|   | 150   | \$   | 0.00   |
|   |   | ·  |  |
|   |   |  | 0.00   |
|   |   | ·  | 115.00   |
| · · ·   | 15d.  | <b>&gt;</b>  | 0.00   |
|   | 4.0   | •  |  |
|   | 16.   | <b>&gt;</b>  | 0.00   |
|   | 47-   | Φ.   |  |
|   |   | *  | 485.41   |
|   |   | ·  | 0.00   |
|   |   | ·  | 0.00   |
|   |   | \$   | 0.00   |
|   |   | ¢  | 0.00   |
|   | 10.   | · -  |  |
|   |   | \$   | 0.00   |
| •   |   |  |  |
|   |   |  | 0.00   |
|   |   | ·  | 0.00   |
|   |   | ·  | 0.00   |
| c. Property, homeowner's, or renter's insurance   |   | ·  | 0.00   |
| d. Maintenance, repair, and upkeep expenses   |   |  | 0.00   |
| e. Homeowner's association or condominium dues  | 20e.  | \$   | 0.00   |
| ner: Specify: Work parking  | 21.   | +\$  | 75.00  |
| <del></del>   |   |  |  |
|   |   |  |  |
| <u> </u>  |   |  | 3,380.41   |
|   |   | \$   |  |
| c. Add line 22a and 22b. The result is your monthly expenses.   |   | \$   | 3,380.41   |
| landata vasuu maastii ku mat imaanna  |   |  | <u> </u>   |
|   |   | •  |  |
|   |   | ·  | 3,395.46   |
| c. Copy your monthly expenses from line 22c above.  | 23b.  | -\$  | 3,380.41   |
| O blood was a subbanassa for a subbanassa for a   |   |  |  |
|   | 23c.  | \$   | 15.05  |
| The result is your monthly net income.  | 230.  | Ψ  | 10.00  |
|   |   |  |  |
| you expect on increase or decrease in your expenses within the  | ou filo 4h!-  | form?  |  |
| you expect an increase or decrease in your expenses within the year after you example do you expect to finish paying for your car loan within the year or do you expect you |   |  | se or decrease because o   |
| example, do you expect to finish paying for your car loan within the year or do you expect you  |   |  | se or decrease because o   |
|   |   |  | se or decrease because c   |
|   | lities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses ansportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations surance. not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance. C. Vehicle insurance. Do not include taxes deducted from your pay or included in lines 4 or 20. a. Life not include taxes deducted from your pay or included in lines 4 or 20. b. Health insurance. C. Vehicle insurance. C. Vehicle insurance. C. Other insurance. Specify:  wss. Do not include taxes deducted from your pay or included in lines 4 or 20. city: stallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: ur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). The payments of alimony, maintenance, and support that you did not report and the payments you make to support others who do not live with you.  B. Real estate taxes C. Property, homeowner's, or renter's insurance Mortgages on other property Real estate taxes Homeowner's association or condominium dues  C. Property, homeowner's, or renter's insurance Mortgages on other property  Mork parking  Culate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 C. Add line 22a and 22b. The result is your monthly expenses.  Liculate your monthly net income. Copy line 22 (monthly expenses from line 22c above.  C. Subtract your monthly expenses from your monthly income. | Itities:   Electricity, heat, natural gas   6a.     Water, sewer, garbage collection   6b.     Telephone, cell phone, Internet, satellite, and cable services   6c.     Other, Specify:   6d.     od and housekeeping supplies   7.     Itilidicare and children's education costs   8.     Sthing, laundry, and dry cleaning   9.     Irisoportation. Include gas, maintenance, bus or train fare.     not include car payments.   11.     natirable contributions and religious donations   12.     tertainment, clubs, recreation, newspapers, magazines, and books   13.     aritable contributions and religious donations   14.     surance.   15a.     Life insurance deducted from your pay or included in lines 4 or 20.     a. Life insurance   15a.     Life insurance   15b.     Car payments for Vehicle 1   17a.     Car payments for Vehicle 2   17b.     Car payments for Vehicle 2   17b.     Car payments for Vehicle 2   17b.     Chief. Specify:   17d.     Ur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule 1, Your Income (Official Form 106)).     her payments you make to support others who do not live with you.     her real property expenses not included in lines 4 or 5 of this form or on Schedule 1: You as a long and the support of th | Itities:  Electricity, heat, natural gas  Water, sewer, garbage collection  Telephone, cell phone, Internet, satellite, and cable services  Other, Specify:  Od and housekeeping supplies  Idicare and children's education costs  Idicare and children's education on condominion dues  Idicare and children's education on condominion dues  Idicare and children's education condominion content content content content content content content content co |

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| Fill in this infor                | mation to identify your                           | case:  |                             |                       |  |
|-----------------------------------|---|--|-----------------------------|-----------------------|--|
| Debtor 1                          | Tanya H Kara                                      |  |                             |                       |  |
|                                   | First Name  | Middle Name  | Last Name                   |                       |  |
| Debtor 2<br>(Spouse if, filing)   | First Name  | Middle Name  | Last Name                   |                       |  |
| (Spouse II, IIIIIIg)              | i iist ivaille                                    |  |                             |                       |  |
| United States Ba                  | ankruptcy Court for the:                          | NORTHERN DISTRICT                                    | OF ILLINOIS                 |                       |  |
| Case number                       |   |  |                             |                       |  |
| (if known)                        |   |  |                             |                       | ☐ Check if this is an  |
|                                   |   |  |                             |                       | amended filing   |
| You must file thi obtaining money | is form whenever you fi                           | ile bankruptcy schedules<br>n connection with a bank |                             | Making a false statem | ent, concealing property, or<br>or imprisonment for up to 20         |
| Sig                               | n Below   |  |                             |                       |  |
|                                   | y or agree to pay some                            | one who is NOT an attor                              | ney to help you fill out ba | nkruptcy forms?       |  |
| ■ No                              |   |  |                             |                       |  |
| ☐ Yes. I                          | Name of person                                    |  |                             |                       | ptcy Petition Preparer's Notice,<br>nd Signature (Official Form 119) |
|                                   | alty of perjury, I declare<br>e true and correct. | that I have read the sum                             | mary and schedules filed    | with this declaration | and  |
| X /s/ Tan                         | ıya H Kara  |  | X                           |                       |  |
|                                   | H Kara  |  | Signature of D              | ebtor 2               |  |

Date

Signature of Debtor 1

Date August 2, 2016

| FIII              | l in this inform                                  | nation to identify you      | r case:  |              |   |  |          |   |
|-------------------|---|-----------------------------|--|--------------|---|--|----------|---|
| De                | btor 1  | Tanya H Kara First Name     | Middle Name  |              | ast Name                                |  |          |   |
| De                | btor 2  | i iist ivailie              | Wilddie Wallie   |              | astivanie                               |  |          |   |
| (Sp               | ouse if, filing)                                  | First Name                  | Middle Name  | I            | ast Name                                |  |          |   |
| Un                | ited States Bar                                   | nkruptcy Court for the:     | NORTHERN DISTRICT  | OF ILLIN     | OIS                                     |  |          |   |
| Ca                | se number   |                             |  |              |   |  |          |   |
| (if k             | nown)   |                             |  |              |   |  | _        | neck if this is an                                    |
|                   |   |                             |  | ·            |   |  | an       | nended filing   |
| ~                 | · · · · · · · · · · · · · · · · · · ·             | 407                         |  |              |   |  |          |   |
|                   | fficial For                                       |                             | A ( ( ) ( )  |              | E ( B                                   |  |          |   |
| St                | atement   | of Financial                | Affairs for Indiv  | iduals       | Filing for B                            | sankruptcy                               |          | 4/10  |
|                   |   |                             | ible. If two married people<br>attach a separate sheet t                               |              |   |  |          |   |
|                   |   | n). Answer every que        |  | 0 11113 1011 | iii oii tiio top oi aii                 | y additional pages, v                    | vine you | nume una susc   |
| Pa                | rt 1: Give D                                      | etails About Your Ma        | arital Status and Where Yo   | ou Lived E   | Before                                  |  |          |   |
| 1.                | What is your                                      | current marital state       | ıs?  |              |   |  |          |   |
|                   | _   |                             |  |              |   |  |          |   |
|                   | <ul><li>☐ Married</li><li>■ Not married</li></ul> | ried                        |  |              |   |  |          |   |
|                   |   |                             |  |              |   |  |          |   |
| 2.                | During the la                                     | ist 3 years, have you       | lived anywhere other than  | n where y    | ou live now?                            |  |          |   |
|                   | □ No  |                             |  |              |   |  |          |   |
|                   | Yes. List   | t all of the places you     | ived in the last 3 years. Do   | not includ   | e where you live nov                    | v.                                       |          |   |
|                   | Debtor 1 Pri                                      | ior Address:                | Dates Debtor lived there   | 1            | Debtor 2 Prior Ac                       | ldress:                                  |          | Dates Debtor 2<br>lived there                         |
|                   | 3830 Emer<br>Schiller Pa                          | rson Drive<br>ark, IL 60176 | From-To:<br><b>10/2013 - 3/2</b>   | 2014         | ☐ Same as Debtor                        | 1  |          | ☐ Same as Debtor 1 From-To:                           |
|                   | 9634 S 52n<br>Oak Lawn,                           |                             | From-To:<br><b>3/2014 - 9/2</b> 0  | )15          | ☐ Same as Debtor                        | 1  |          | Same as Debtor 1 From-To:                             |
| <b>3.</b><br>stat | es and territorie                                 | es include Arizona, Ca      | ver live with a spouse or lilifornia, Idaho, Louisiana, N                              | levada, Ne   | ew Mexico, Puerto R                     |  | •        | \ , , ,   |
| De                | #4.0 Famile!                                      | n the Courses of Ver        | u laceme   |              |   |  |          |   |
| Pa                | rt 2 Explain                                      | n the Sources of You        | ir income  |              |   |  |          |   |
| 4.                | Fill in the tota                                  | I amount of income yo       | nployment or from operat<br>ou received from all jobs and<br>have income that you rece | d all busine | esses, including part                   | -time activities.                        | us calen | dar years?  |
|                   | □ No  |                             |  |              |   |  |          |   |
|                   | Yes. Fill   | in the details.             |  |              |   |  |          |   |
|                   |   |                             | Debtor 1   |              |   | Debtor 2                                 |          |   |
|                   |   |                             | Sources of income<br>Check all that apply.   | (befo        | s income<br>re deductions and<br>sions) | Sources of incom<br>Check all that apply |          | Gross income<br>(before deductions<br>and exclusions) |

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Debtor 1 Tanya H Kara

|   | Debtor 1   |   | Debtor 2                                   |   |
|---|--|---|--|---|
|   | Sources of income<br>Check all that apply.                               | Gross income<br>(before deductions and<br>exclusions)         | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ■ Wages, commissions, bonuses, tips                                      | \$26,804.00   | ☐ Wages, commissions, bonuses, tips        |   |
|   | ☐ Operating a business   |   | ☐ Operating a business                     |   |
| For last calendar year:<br>(January 1 to December 31, 2015)             | ■ Wages, commissions, bonuses, tips                                      | \$41,731.76   | ☐ Wages, commissions, bonuses, tips        |   |
|   | ☐ Operating a business   |   | ☐ Operating a business                     |   |
| For the calendar year before that:<br>(January 1 to December 31, 2014)  | ■ Wages, commissions, bonuses, tips                                      | \$33,985.55   | ☐ Wages, commissions, bonuses, tips        |   |
|   | ☐ Operating a business   |   | ☐ Operating a business                     |   |
| List each source and the gross inco  ☐ No ☐ Yes. Fill in the details.   | me from each source separate  Debtor 1 Sources of income Describe below. | tely. Do not include income the Gross income from each source | Debtor 2 Sources of income Describe below. | Gross income (before deductions                       |
|   |  | (before deductions and exclusions)                            |  | and exclusions)                                       |
| From January 1 of current year until the date you filed for bankruptcy: | Child Support  | \$5,539.10  |  |   |
| For last calendar year:<br>(January 1 to December 31, 2015)             | Child Support  | \$9,000.00  |  |   |
| For the calendar year before that:<br>(January 1 to December 31, 2014)  | Child Support  | \$750.00  |  |   |
| Part 3: List Certain Payments You                                       | Made Before You Filed for I  | Bankruptcy  |  |   |
|   |  |   |  |   |
|   | •  | imer debts. Consumer debts                                    | are defined in 11 U.S.C. § 10              | 1(8) as "incurred by an                               |
| During the 90 days befo   | re you filed for bankruptcy, die   | d you pay any creditor a total                                | of \$6,425* or more?                       |   |

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

not include payments to an attorney for this bankruptcy case.

List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

□ No.

☐ Yes

Go to line 7.

Document Page 32 of 40 Tanya H Kara Case number (if known) Debtor 1 Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment** Total amount Amount you Was this payment for ... paid still owe Mazda 5/2016, 6/2016, \$1,446.23 \$30,807.00 ■ Mortgage PO Box 78069 7/2016 Car Phoenix, AZ 85062 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Amount you **Insider's Name and Address** Reason for this payment Dates of payment Total amount still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment Include creditor's name still owe paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number □ Pending Chase vs Tanya H Kara **Foreclosure** Kane County Circuit Court 15 CH 3285 Geneva, IL 60134 □ On appeal Concluded

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Document Debtor 1 Tanya H Kara

| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.   |   |  |                             |  |  |  |  |  |
|-----|--|---|--|-----------------------------|--|--|--|--|--|
|     | No. Go to line 11.   |   |  |                             |  |  |  |  |  |
|     | Yes. Fill in the information below.  |   |  |                             |  |  |  |  |  |
|     | Creditor Name and Address  | Describe the Property   | Date   | Value of the                |  |  |  |  |  |
|     |  | Explain what happened   |  | property                    |  |  |  |  |  |
|     | JP Morgan Chase Bank<br>3415 Vision Drive  | 3830 Emerson Drive Schiller Park, Illinois 60176  | 04/12/2016                                       | \$290,000.00                |  |  |  |  |  |
|     | Columbus, OH 43219   | ☐ Property was repossessed.   |  |                             |  |  |  |  |  |
|     |  | ■ Property was foreclosed.  |  |                             |  |  |  |  |  |
|     |  | ☐ Property was garnished.   |  |                             |  |  |  |  |  |
|     |  | ☐ Property was attached, seized or levied.  |  |                             |  |  |  |  |  |
| 11. | Within 90 days before you filed for bank accounts or refuse to make a payment b  ■ No □ Yes. Fill in the details.  Creditor Name and Address   | ruptcy, did any creditor, including a bank or financial in ecause you owed a debt?  Describe the action the creditor took   | Date action was                                  | amounts from your<br>Amount |  |  |  |  |  |
|     |  |   | taken  |                             |  |  |  |  |  |
|     | No Yes  **T 5: List Certain Gifts and Contribution  Within 2 years before you filed for bankr No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift and Address: | uptcy, did you give any gifts with a total value of more  | than \$600 per person?  Dates you gave the gifts | ?<br>Value                  |  |  |  |  |  |
| 14. | Within 2 years before you filed for bankr  ■ No □ Yes. Fill in the details for each gift or or   | uptcy, did you give any gifts or contributions with a tot ontribution.  | al value of more than                            | \$600 to any charity?       |  |  |  |  |  |
|     | Gifts or contributions to charities that 1 more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code  | otal Describe what you contributed  | Dates you contributed                            | Value                       |  |  |  |  |  |
| Pai | t 6: List Certain Losses   |   |  |                             |  |  |  |  |  |
| 15. | or gambling?   | ptcy or since you filed for bankruptcy, did you lose any  | thing because of thef                            | t, fire, other disaster     |  |  |  |  |  |
|     | — 100. Thirm the dotalle.  | Describe any incurence account for the loss   | Date of  | Value of managets           |  |  |  |  |  |
|     | Describe the property you lost and how the loss occurred   | <b>Describe any insurance coverage for the loss</b> Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss                                | Value of property<br>lost   |  |  |  |  |  |
| Pai | t 7: List Certain Payments or Transfers  | S   |  |                             |  |  |  |  |  |

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 4 Case 16-25020 Doc 1 Filed 08/03/16 Entered 08/03/16 19:04:49 Desc Main Page 34 of 40 Case number (if known) Document

Debtor 1 Tanya H Kara

|     | consulted about seeking bankruptcy or prep<br>Include any attorneys, bankruptcy petition prepa  |  |                               | rices required | in your bankruptcy.                                 |   |
|-----|---|--|-------------------------------|----------------|---|---|
|     | □ No  |  |                               |                |   |   |
|     | Yes. Fill in the details.   |  |                               |                |   |   |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You   | Description and variansferred                        | alue of any prope             | rty            | Date payment or transfer was made                   | Amount of payment                             |
|     | Petti Murphy & Associates<br>1100 Ravinia Place<br>Orland Park, IL 60462<br>tmurphy@pettimurphylaw.com  | Bankruptcy Att<br>Fee                                | orney Fee and F               | iling          | 7/28/2016   | \$2,035.00                                    |
|     | Abacus<br>17337 Ventura Boulevard<br>Encino, CA 91316<br>www.abacuscc.org   | Credit Counsel                                       | ing                           |                | 5/14/2016   | \$25.00                                       |
|     | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you  | s or to make payments                                |                               |                | r transfer any prop                                 | erty to anyone who                            |
|     | Yes. Fill in the details.   |  |                               |                |   |   |
|     | Person Who Was Paid<br>Address  | Description and variansferred                        | alue of any prope             | rty            | Date payment or transfer was made                   | Amount of payment                             |
|     | Within 2 years before you filed for bankrupto transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already  No  Yes. Fill in the details. | usiness or financial affa<br>de as security (such as | airs?<br>the granting of a se |                |   |   |
|     | Person Who Received Transfer<br>Address<br>Person's relationship to you   | Description and very property transfer               |                               |                | nny property or<br>received or debts<br>change      | Date transfer was made                        |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-profite No Yes, Fill in the details.   |  | y property to a se            | lf-settled tru | st or similar device                                | of which you are a                            |
|     | Name of trust   | Description and v                                    | alue of the prope             | rty transferre | ed  | Date Transfer was made                        |
| Par | 8: List of Certain Financial Accounts, Ins  | truments, Safe Deposi                                | t Boxes, and Stora            | age Units      |   |   |
|     | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc   | r other financial accou                              | nts; certificates of          |                | •   | , ,   |
|     | Yes. Fill in the details.   |  |                               |                |   |   |
|     | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)  | Last 4 digits of account number                      | Type of account instrument    | clo<br>mo      | te account was<br>sed, sold,<br>ved, or<br>nsferred | Last balance<br>before closing or<br>transfer |

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Debtor 1 Tanya H Kara

| 21. | <ol> <li>Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?</li> </ol> |   |                                       |                       |  |  |  |  |  |
|-----|--|---|---------------------------------------|-----------------------|--|--|--|--|--|
|     | No No  |   |                                       |                       |  |  |  |  |  |
|     | Yes. Fill in the details.  |   |                                       | _                     |  |  |  |  |  |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   | Who else had access to it? Address (Number, Street, City, State and ZIP Code)   | Describe the contents                 | Do you still have it? |  |  |  |  |  |
| 22. | Have you stored property in a storage unit or p  | place other than your home within 1   | year before you filed for bankruptcy  | ?                     |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |                                       |                       |  |  |  |  |  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  | Describe the contents                 | Do you still have it? |  |  |  |  |  |
| Par | t 9: Identify Property You Hold or Control for   | ·   |                                       |                       |  |  |  |  |  |
| 23. | Do you hold or control any property that some for someone.   | one else owns? Include any proper   | ty you borrowed from, are storing for | , or hold in trust    |  |  |  |  |  |
|     | ■ No   |   |                                       |                       |  |  |  |  |  |
|     | ☐ Yes. Fill in the details.  |   |                                       |                       |  |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Describe the property                 | Value                 |  |  |  |  |  |
| Par | t 10: Give Details About Environmental Inform  | nation  |                                       |                       |  |  |  |  |  |
| For | the purpose of Part 10, the following definitions  | s apply:  |                                       |                       |  |  |  |  |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su  | air, land, soil, surface water, ground  | - ·                                   |                       |  |  |  |  |  |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposa  | -   | aw, whether you now own, operate, o   | or utilize it or used |  |  |  |  |  |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or  | nmental law defines as a hazardous  | waste, hazardous substance, toxic s   | substance,            |  |  |  |  |  |
| Rep | •  |   | they occurred.                        |                       |  |  |  |  |  |
| 24. | Has any governmental unit notified you that yo   | ort all notices, releases, and proceedings that you know about, regardless of when they occurred.  Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? |                                       |                       |  |  |  |  |  |
|     | ■ No   |   |                                       |                       |  |  |  |  |  |
|     | Yes. Fill in the details.  |   |                                       |                       |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code)  | Environmental law, if you know it     | Date of notice        |  |  |  |  |  |
| 25. | Have you notified any governmental unit of any   | y release of hazardous material?  |                                       |                       |  |  |  |  |  |
|     | ■ No   |   |                                       |                       |  |  |  |  |  |
|     | ☐ Yes. Fill in the details.  |   |                                       |                       |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code)  | Environmental law, if you know it     | Date of notice        |  |  |  |  |  |
|     |  |   |                                       |                       |  |  |  |  |  |

Tanya H Kara Case number (if known) Debtor 1 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tanya H Kara Signature of Debtor 2 Tanya H Kara Signature of Debtor 1 Date August 2, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Desc Main

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| Fill in this inform                  | nation to identify your o                        | ase:  |   | 1  |
|--------------------------------------|--|---|---|--|
| Debtor 1                             | Tanya H Kara                                     |   |   |  |
| Debtor 2                             | First Name                                       | Middle Name                                   | Last Name   |  |
| (Spouse if, filing)                  | First Name                                       | Middle Name                                   | Last Name   |  |
| United States Bar                    | nkruptcy Court for the:                          | NORTHERN DIST                                 | RICT OF ILLINOIS  |  |
| Case number                          |  |   |   | ☐ Check if this is an                                  |
|                                      |  |   |   | amended filing   |
|                                      |  |   |   |  |
| Official For                         |  |   |   |  |
| <u>Statemen</u>                      | t of Intentio                                    | n for Indiv                                   | iduals Filing Under Chapt   | er 7 12/15   |
| If you are an indiv                  | vidual filing under chap                         | oter 7, you must fill                         | out this form if:   |  |
|                                      | claims secured by you                            |   |   |  |
| You must file this                   | ver is earlier, unless th                        | ithin 30 days after y                         | ot expired.  you file your bankruptcy petition or by the date settime for cause. You must also send copies to t                                       |  |
|                                      | ople are filing together<br>d date the form.     | in a joint case, bot                          | h are equally responsible for supplying correct   | information. Both debtors must                         |
|                                      | nd accurate as possible<br>our name and case num |   | needed, attach a separate sheet to this form. Or  | n the top of any additional pages,                     |
| Part 1: List Yo                      | our Creditors Who Have                           | Secured Claims                                |   |  |
| For any creditor information be      | -  | rt 1 of Schedule D:                           | Creditors Who Have Claims Secured by Proper   | ty (Official Form 106D), fill in the                   |
| Identify the cre                     | ditor and the property th                        | nat is collateral                             | What do you intend to do with the property the secures a debt?  | at Did you claim the property as exempt on Schedule C? |
|                                      |  |   |   |  |
| Creditor's Maname:                   | azda   |   | ☐ Surrender the property.   | □ No   |
|                                      |  |   | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>   | ■ Yes  |
| Description of property              | 2016 Mazda 3 6000<br>Location: 5724 We           |   | Reaffirmation Agreement.  Retain the property and [explain]:  |  |
| securing debt:                       | Street #1E, Chicage 60415                        | o Ridge IL                                    | — Retain the property and [explain].  |  |
| Part 2: List Yo                      | our Unexpired Personal                           | Property Leases                               |   |  |
| For any unexpired in the information | d personal property lean below. Do not list rea  | ise that you listed i<br>I estate leases. Une | n Schedule G: Executory Contracts and Unexpi<br>expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p | the lease period has not yet ended.                    |
| Describe your ur                     | nexpired personal prop                           | erty leases                                   |   | Will the lease be assumed?                             |
| Lessor's name:                       |  |   |   | □ No   |
| Description of lear<br>Property:     | sed  |   |   | ☐ Yes  |
| Lessor's name:                       |  |   |   | □ No   |
| Description of lease<br>Property:    | sea  |   |   | ☐ Yes  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Del  | otor 1              | Tanya H Kara  | Case number (if known)  |       |
|------|---------------------|---|---|-------|
|      |                     |   |   |       |
|      | sor's n             |   | □ No  |       |
|      | scription<br>perty: | n of leased   | □ v   |       |
| 1 10 | porty.              |   | ☐ Yes   |       |
|      | sor's n             |   | □ No  |       |
|      | scription<br>perty: | n of leased   | □ v   |       |
| 1 10 | porty.              |   | ☐ Yes   |       |
|      | sor's n             |   | □ No  |       |
|      | scription<br>perty: | n of leased   | □ v   |       |
|      | porty.              |   | ☐ Yes   |       |
|      | sor's n             |   | □ No  |       |
|      | scription<br>perty: | n of leased   | □ v   |       |
| 1 10 | porty.              |   | ☐ Yes   |       |
|      | sor's n             |   | □ No  |       |
|      | scription<br>perty: | n of leased   | П. и  |       |
| 1 10 | perty.              |   | ☐ Yes   |       |
| Par  | t 3:                | Sign Below  |   |       |
|      |                     | alty of perjury, I declare that I have indica<br>at is subject to an unexpired lease. | ed my intention about any property of my estate that secures a debt and any per | sonal |
| Χ    | /s/ Ta              | anya H Kara   | X   |       |
|      |                     | ra H Kara   | Signature of Debtor 2   |       |
|      | Signa               | ture of Debtor 1  |   |       |
|      | Date                | August 2, 2016  | Date  |       |
|      |                     |   |   |       |

Chase PO Box 15298 Wilmington, DE 19850

Chase 3415 Vision Dr Columbus, OH 43219

Citibank Box 6500 Sioux Falls, SD 57117

Dorothy A. Styx Ltd 2559 Flossmoor Road Flossmoor, IL 60422

Eagle Recovery 2601 W Forrest Hill Ave Peoria, IL 61604

Foot & Ankle Associates LTD 4650 Southwest Highway Oak Lawn, IL 60453

Heavner & Assoc PO Box 740 Decatur, IL 62523

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Mazda PO Box 78069 Phoenix, AZ 85062

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